

12 CV 05505

UNITED STATES DISTRICT COURT
Southern District of New YorkDavid Ortiz

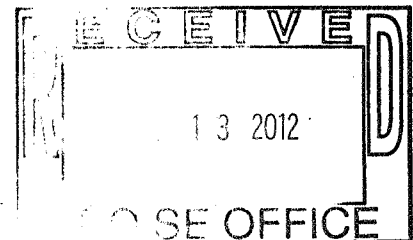
(In the space above enter the full name(s) of the plaintiff(s).)

COMPLAINT

-against-

Sgt. Francis Conroy, #04773 14th Pct
Det. Jason Nachtrab, #03263 14th Pct
Officer Edwin Feliciano, #06892 14th Pct
Bellevue Hospital Center
N.Y.C. Police Department 14th PCT.
City of New YorkJury Trial: ☒ Yes ☐ No
(check one)

(In the space above enter the full name(s) of the defendant(s). If you cannot fit the names of all of the defendants in the space provided, please write "see attached" in the space above and attach an additional sheet of paper with the full list of names. The names listed in the above caption must be identical to those contained in Part I. Addresses should not be included here.)



I. Parties in this complaint:

- A. List your name, address and telephone number. If you are presently in custody, include your identification number and the name and address of your current place of confinement. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff	Name	Current Institution
	<u>David Ortiz</u>	<u>B+C #3491109261</u>
	<u>Street Address 601 Walton Ave</u>	<u>Otis Bantom Correction Center</u>
	<u>County, City Bronx</u>	<u>1600 HAZEN STREET</u>
	<u>State & Zip Code N.Y. 10451</u>	<u>E. Elmhurst NY 11370</u>
	<u>Telephone Number (347) 404-2483</u>	<u>NYSID # 8983842K</u>

- B. List all defendants. You should state the full name of the defendant, even if that defendant is a government agency, an organization, a corporation, or an individual. Include the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant No. 1	Name	Address
	<u>Sgt. Francis Conroy, shield #04773 14th PCT.</u>	<u>357 W 35th St.</u>

County, City N.Y.
 State & Zip Code N.Y. 10001
 Telephone Number (212) 239-9811

Defendant No. 2

Name Det. Jason Nachtrab, shield # 03263 14th PCT
 Street Address 357 W 35th St.
 County, City N.Y.
 State & Zip Code N.Y.
 Telephone Number (212) 239-9811

Defendant No. 3

Name Officer Edwin Feliciano, shield # 06892 14th PCT
 Street Address 357 W 35th St.
 County, City N.Y.
 State & Zip Code N.Y.
 Telephone Number (212) 239-9811

Defendant No. 4

Name Bellevue Hospital Center
 Street Address 462 1st Ave. 19th Floor
 County, City N.Y.
 State & Zip Code N.Y.
 Telephone Number (212) 562-4333

See Attached for Defendants 5, 6

II. Basis for Jurisdiction:

Federal courts are courts of limited jurisdiction. Only two types of cases can be heard in federal court: cases involving a federal question and cases involving diversity of citizenship of the parties. Under 28 U.S.C. § 1331, a case involving the United States Constitution or federal laws or treaties is a federal question case. Under 28 U.S.C. § 1332, a case in which a citizen of one state sues a citizen of another state and the amount in damages is more than \$75,000 is a diversity of citizenship case.

A. What is the basis for federal court jurisdiction? (check all that apply)

☒ Federal Questions ☐ Diversity of Citizenship

B. If the basis for jurisdiction is Federal Question, what federal Constitutional, statutory or treaty right is at issue?

Amendment # 4, 8,

C. If the basis for jurisdiction is Diversity of Citizenship, what is the state of citizenship of each party?

Plaintiff(s) state(s) of citizenship _____

Defendant(s) state(s) of citizenship _____

III. Statement of Claim:

State as briefly as possible the facts of your case. Describe how each of the defendants named in the caption of this complaint is involved in this action, along with the dates and locations of all relevant events.

Defendant No. 5

Name: N.Y.C Police Department 14th PCT. (Midtown South)

Street Address: 357 W 35th street

County, City: N.Y.

State + Zip Code: N.Y. 10001

Tel. #: (212) 239-9811

Defendant No. 6

Name: City of New York

Street Address:

County, City:

State + Zip Code:

Tel. #

You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

A. Where did the events giving rise to your claim(s) occur? At the 14th Precinct Holding cell area.

B. What date and approximate time did the events giving rise to your claim(s) occur? 6/7/11, On or about 4:45 PM.

C. Facts: See Attachment "Facts"

What
happened
to you?

Who did
what?

Was anyone
else
involved?

Who else
saw what
happened?

IV. Injuries:

If you sustained injuries related to the events alleged above, describe them and state what medical treatment, if any, you required and received.

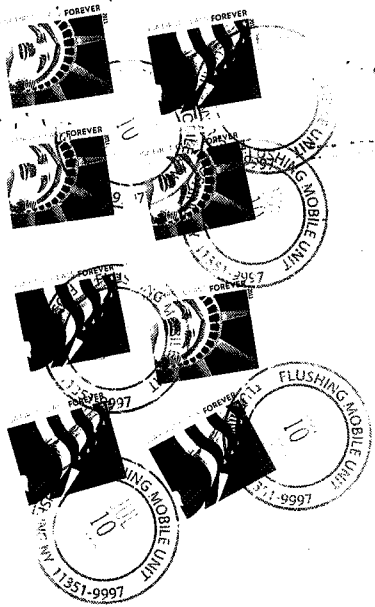
See "Facts"

Facts:

On or about June 7th, 2011 following my arrest I was subjected to an illegal and unnecessary strip search at the 14th precinct. Pursuant to said strip search the police forcibly conducted an invasive search of my body by inserting an object into my anal cavity. I was held by two officers while the third one sexually abused me. Two other individuals by the last name of Bonilla don't know if related were cell by cell of me when incident occurred and heard the scuffles and screams that I gave as I was being abused. They also was detained at the 14th precinct. I requested medical attention and when brought to Bellevue Hospital Center I insisted on being allowed to talk to the Doctor in confidence but the police officers would not allow a confidential medical conversation to take place and the medical staff would not give me any treatment. They referred me to the psychiatrist where I was medicated for Anxiety + Depression. I David Ortiz experienced severe pain amounting to physical and emotional torture due to the invasive insertion into my cavity. I suffered emotional torture and humiliation as a result of the strip search and arrest and I am still incarcerated and traumatized.

→

These officers are being sued in their Individual and Official capacities. Also being sued are The City of New York and Bellevue Hospital under the Monell claim.



Pro-Se Office
United States District Court
Southern District of New York
500 Pearl Street, Room 230
New York, New York 10007



David Ortiz
b/c # 349-11-09261
Otis Bantam Correctional Center
1600 Hazen street
East Elmhurst, NY 11370

RECEIVED
PRO SE OFFICE
JUL 13 A 11:22

Legal Mail